The European Heart Network calls for a comprehensive and ambitious Cardiovascular Health Plan in Europe. Cardiovascular disease (CVD) is a vast group of disorders, all related to the heart and circulatory (vascular) system, including stroke, with a high prevalence of morbidity and mortality in the EU. CVD remains the leading cause of death in the EU claiming 36% of all deaths in the EU and impacting the lives of some 60 million people who live with CVD.

Steady and substantial reductions in mortality rates in previous decades have slowed down over the past years in several European countries, which has contributed to the slowdown in life expectancy improvements. Beating CVD with a comprehensive, EU-wide plan for primary and secondary prevention, early detection, patient care, management and treatment, is an opportunity for the EU to emerge as innovator and world leader in public health. The plan needs to include clear targets, milestones, incentives, and - considering the high cost of CVD (EUR 282 billion a year) - financing available for EU Member States and for CVD research and innovation.

**Concrete action**

**Idea:**

- What are the objectives and the scope of the action?

The Cardiovascular health plan has to focus on:
- Investing in creating healthier living environments, coupled with investing in early detection, allowing early intervention and secondary prevention of CVD.
- Unlocking the full potential of digital technologies for cardiovascular health.
- Modernising cardiovascular patients’ pathway by supporting interdisciplinary health care models combined with digital health to strengthen outpatient care.
- Improving health and digital literacy to tackle inequalities.

How will this action support the prevention of non-communicable diseases in the EU?
EU added value and impact:

What is the EU added value and impact of the action?

Robust action on CVD has the potential to significantly reduce health inequalities in the EU.

- A cardiovascular health plan can address social and economic inequalities: inequalities in mortality from CVD account for almost half of the excess mortality in lower socio-economic groups in most European countries.
- A European Cardiovascular health plan can address geographical inequalities: the prevalence of CVD is higher in Eastern and Central European countries and lower in Western, Northern and Southern European countries.
- A Cardiovascular Health plan can address gender inequalities: while among men less than 50% of the excess mortality is due to CVD, in women this percentage is 80%.

CHALLENGES AND ENABLERS

Which issues will your action address on health promotion and prevention of non-communicable diseases in particular related to health determinants, or socio-economic, environmental, commercial determinants of health?

The premise that CVD is a lifestyle disease has led to public health interventions (primary prevention) aimed at tackling lifestyle determinants. However, causes for CVD are multi-factorial and, given the scale of the disease, it would be more appropriate to refer to CVD as a societal disease. Greater reduction of exposure to the main behavioural risk factors (e.g. smoking, unhealthy diet, physical inactivity, alcohol consumption) can increase the number of years lived in good health and will produce large societal gains.

Moreover, unmodifiable risk factors (e.g. genetic predisposition, congenital factors, functional decline due to ageing, or cardiovascular morbidity due to other chronic conditions or infectious disease such as COVID-19, and their therapies) also impact on the burden of CVD. Secondary prevention is therefore equally crucial. By investing in early detection, more patients will be identified and have the possibility to be treated early in quality-assured pathways to prevent the onset of the disease, debilitating CVD events and deaths. In addition, more reliable data on CVD will become available. Better data on CVD, will stimulate research and enable data driven healthcare.
IMPELEMENTATION PLAN

- Provide your views on how your organisation can be involved and help in taking this idea forward.

EHN’s expertise and work contribute towards creating an environment in Europe that is conducive to healthy lives for all and that facilitates early detection of people at high risk of CVD.

EHN works with the EU institutions on policies contributing to CVD prevention and cardiovascular health promotion, such as those mentioned in the EU Green Deal, the Farm to Fork Strategy and the NCD prevention policies referenced in the EU Beating Cancer Plan, the EU4Health Strategy and the Healthier together Initiative.

EHN also works with WHO on its CVD Signature Initiative.